DECLARATION FOR UTILITY OR

Declaration

Submitted after Initial

PTO/SB/01 (10-01)
Approved for use through 10/31/2002. OMB 0651-0032
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Attorney Docket Number LCB388 Jason O'Young **First Named Inventor** COMPLETE IF KNOWN **Application Number** March 4, 2002 Filing Date Art Unit **Examiner Name**

As the below named inventor, I hereby declare that:						
My residence, mailing address, and citizenship are as stated below next to my name.						
I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:						
CABLE TIE HAVING STEPPED DOWN STRAP BODY TEETH						
(Title of the Invention)						
the specification of which						
is attached hereto						
OR						
was filed on (MM/DD/YYYY) as United States Application Number or PCT International						
So stated States Application Number of FOT litternational						
Application Number and was amended on (MM/DD/YYYY) (if applicable).						
hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.						
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.						
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.						
Prior Foreign Application Number(s) Foreign Filing Date Priority Certified Copy Attached? (MM/DD/YYYY) Not Claimed YES NO						
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:						

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

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Christopher S. Clancy, Panduit Corp.				
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city Tinley Park		State I1	llinois	60477 ZIP
USA Country Tele	708-5	32-1800	ext1302	708-614-8344 Fax
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.				
NAME OF SOLE OR FIRST INVENTOR :	A petition h	as been file	ed for this unsigr	ned inventor
Given Name Jason (first and middle [if any])		Family Nan		ng
Inventor's Jase O'Yaung Signature				03/04/02 Date
Residence: City Mokena	State Illin	ois Cou	USA Intry	USA Citizenship
Mailing Address 19123 Weber Road,	Apt. 2			`
Mokèna 💉	Illin State	ois	60448	USA Country
NAME OF SECOND INVENTOR:	A petition has	s been filed	for this unsigne	d inventor
Given Name Jonathan (first and middle [if any])		Family Namor Surname		
Inventor's Jonathan De Mik Signature	1			03/04/02 Date
Residence: City Schererville	Indi State	.ana Cou	USA ntry	USA Citizenship
2943 Manchester Lane Mailing Address				
City Schererville	State India	ina ZIP	46375	Country USA
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.				

Please type a plus sign (+) inside this box		

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	March 4, 2002
First Named Inventor	Jason O'Young
Title	Cable Tie Having
Group Art Unit	
Examiner Name	
Attorney Docket Number	LCB 388

I hereby appoint:				
Practitioners at Customer Number OR Place Custom Number Bar (Label here				
Practitioner(s) named below:				
Name Registration Number Robert A. McCann 35.606				
Robert A. McCann 35,606 Jay A. Saltzman 38,293				
Christopher S. Clancy 44,618				
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact business in the United States Patent and Trademark Office connected therewith.	all			
Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Place Customer Number Number Sar Code Label here				
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Address Legal Dept. TP12				
Address 17301 Ridgeland Avenue				
TICA CONTO	0477			
Country				
Telephone 708-532-1800 ext1302 Fax 708-614-8344 am the:				
SIGNATURE of Applicant or Assignee of Record				
Name Jason O'Young				
Signature Jason O'Young				
Date March 4, 2002				
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.				
∑CX*Total of 2 forms are submitted.				

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Application Number	
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Examiner Name	
Attorney Docket Number	LCB 388

I hereby appoint:			
Practitioners at Customer Number OR Practitioner(s) named below:	Place Customer Number Bar Code Label here		
Name	Decidentian Number		
Robert A. McCann	Registration Number 35,606		
Jay A. Saltzman	38,293		
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Address Legal Dept. TP12	F		
Address 17301 Ridgeland Avenue			
Cit. Tiploy Park	ate IL Zip 60477		
Country USA	2.19		
Telephone 708-532-1800 ext1302 Fa	ax 708-614-8344		
I am the:			
X Applicant/Inventor.			
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).			
SIGNATURE of Applicant or Assignee	of Record		
Jonathan DeMik			
Signature Arnothan DeMik			
Date March 4, 2002			
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.			
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